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**Attached are the following pages:**

1. Revocation of Power of Attorney and Appointment of New Power of Attorney form PTO/SB/82 [1 page]; and
2. Power of Attorney and Correspondence Address Indication form PTO/SB/81, [1 page].

Applicant: Walter V. Klemp

Group Art Unit: 3761

Serial No.: 10/780,345

Examiner: J. Stephens

Filing Date: February 17, 2004

Atty. Docket No.: AHP-P01880US2

Title: Disposable Absorbent Article Employing an Absorbent Composite and  
Method of Making the Same

P.O. Box 70889 Houston, TX 77270-70880  
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PTO/SB/82 (06-03)

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**REVOCATION OF POWER OF  
ATTORNEY and APPOINTMENT OF  
NEW POWER OF ATTORNEY**

Application Number	10/780,345
Filing Date	February 17, 2004
First Named Inventor	Walter V. Klomp
Art Unit	3761
Examiner Name	Jacqueline F. Stephens
Attorney Docket Number	AHP-P01880US2

I hereby revoke all previous powers of attorney given in the above-identified application:

☒ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number:

000069721

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with  
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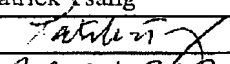
OR

<input checked="" type="checkbox"/> Firm or Individual Name	Alberto Q. Amatong, Jr.					
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City	Houston	State	TX	Zip	77270-70889	
Country	USA					
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I am the:

☐ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Patrick Tsang					
Signature						
Date	2 April 2007			Telephone	011-852-248-44820	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM

Application Number	10/780,345
Filing Date	February 17, 2004
First Named Inventor	Klemp
Title	Disposable Absorbent Article...
Art Unit	3761
Examiner Name	Jacqueline F. Stephens
Attorney Docket Number	AHP-P01880US2

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

000069721

OR

☒ Practitioner(s) named below:

Name	Registration Number
Alberto Q. Amatong, Jr.	41,850

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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☒ Firm or Individual Name Alberto Q. Amatong, Jr.

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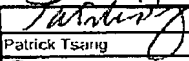
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I am the:

☐ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Signature		Date	2 April 2007
Name	Patrick Tsang	Telephone	
Title and Company	DIRECTOR		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

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